

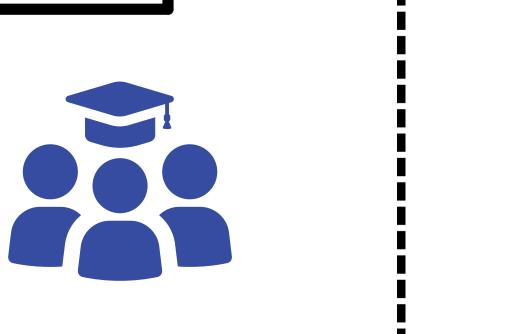
# DISABILITY DISCLOSURE IN HIGHER EDUCATION SETTINGS: LANGUAGE USE & EXPLICIT PRIMING EFFECTS ON DECISION-MAKING



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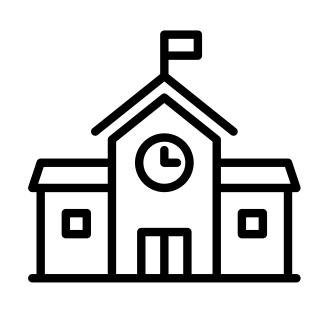
#### BACKGROUND

20% of undergraduates are estimated to be students with disabilities (GAO, 2024).



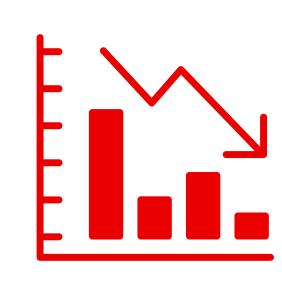
75% of students with disabilities do not disclose their disability to their school (Lindsay et al., 2018).

Only 23% of students who had accommodations in K-12, receive accommodations in college (Newman & Maudus, 2015).



For every year that a student with a disability fails to disclose, time to graduation increases by almost 6 months (Hundson, 2013).

Outcomes for students with disabilities are consistently poorer than their nondisabled peers, highlighting an increased need for research in this population. (GAO, 2024).



Current language use in surveys uses the direct question approach: "Do you have a disability?" (Y/N). But has been found to be ineffective & unreliable (Cockburn et al., 2023).

# **MODELS OF DISABILITY:**



# assumes normality; disability exists

SOCIAL MODEL OF DISABILITY: disability exists as barriers to





within the person (biological).



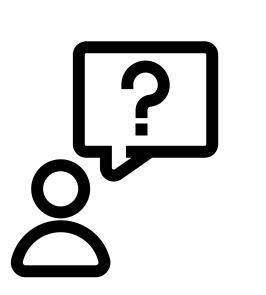
access within society, not within the person (societal).



Due to stigma, students with disabilities are less likely to disclose their disability because they do not identify with the term, "disability", creating feelings of shame and discomfort (Lister et al., 2020; Morina, 2024).

### **RESEARCH QUESTION:**

Does language framing and priming increase perceived disclosure rates of students with disabilities higher education settings?



#### **RESEARCH HYPOTHESES:**

L. Language framing will lead to increased perceived disability disclosure rates among participants.

2. Explicit priming will increase perceived disability disclosure rates among participants.

3. Combining language framing and priming will amplify perceived disclosure.

#### **METHODS**

#### **PRIME**

#### NO PRIME







List of health conditions & examples.

# No examples.

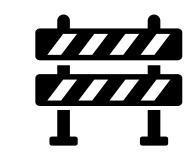
## FRAMING CONDITIONS



**DISABILITY FRAMING:** "DISABILITY" as defining term (currently in use).

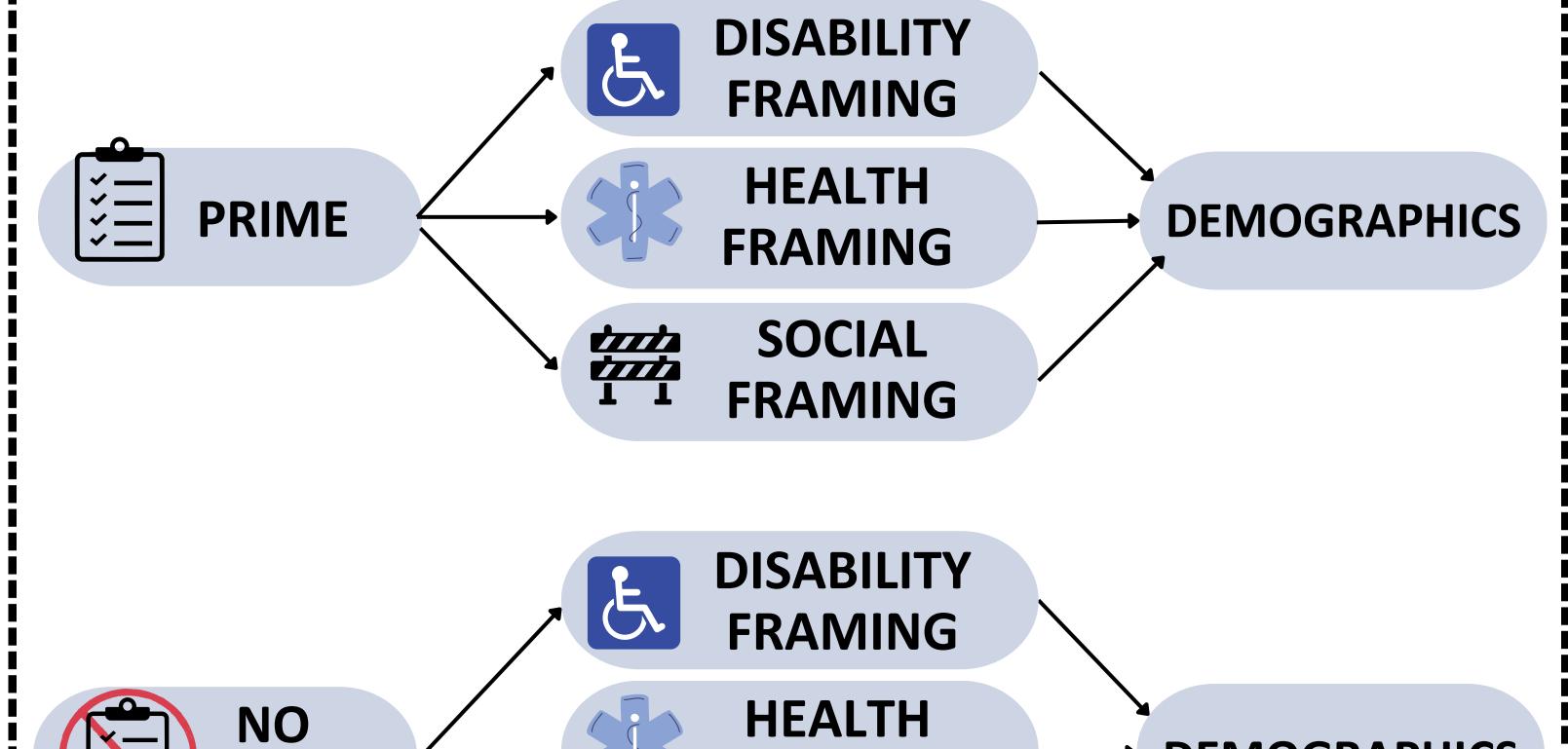


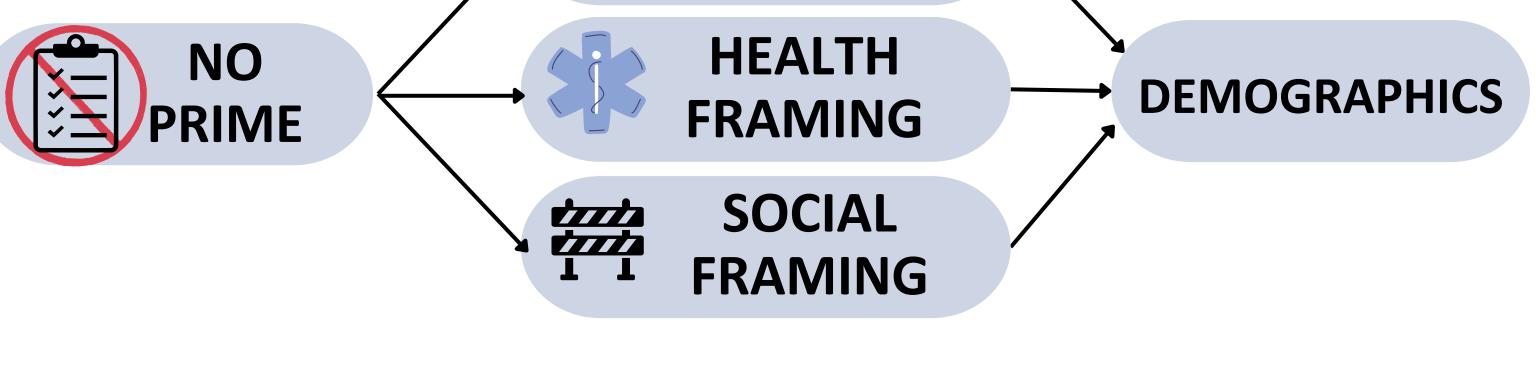
HEALTH FRAMING: "HEALTH CONDITION" as defining term (based on medical model).



**SOCIAL FRAMING:** "BARRIER" as defining term (based on social model).

## 2x3 FACTORIAL DESIGN:

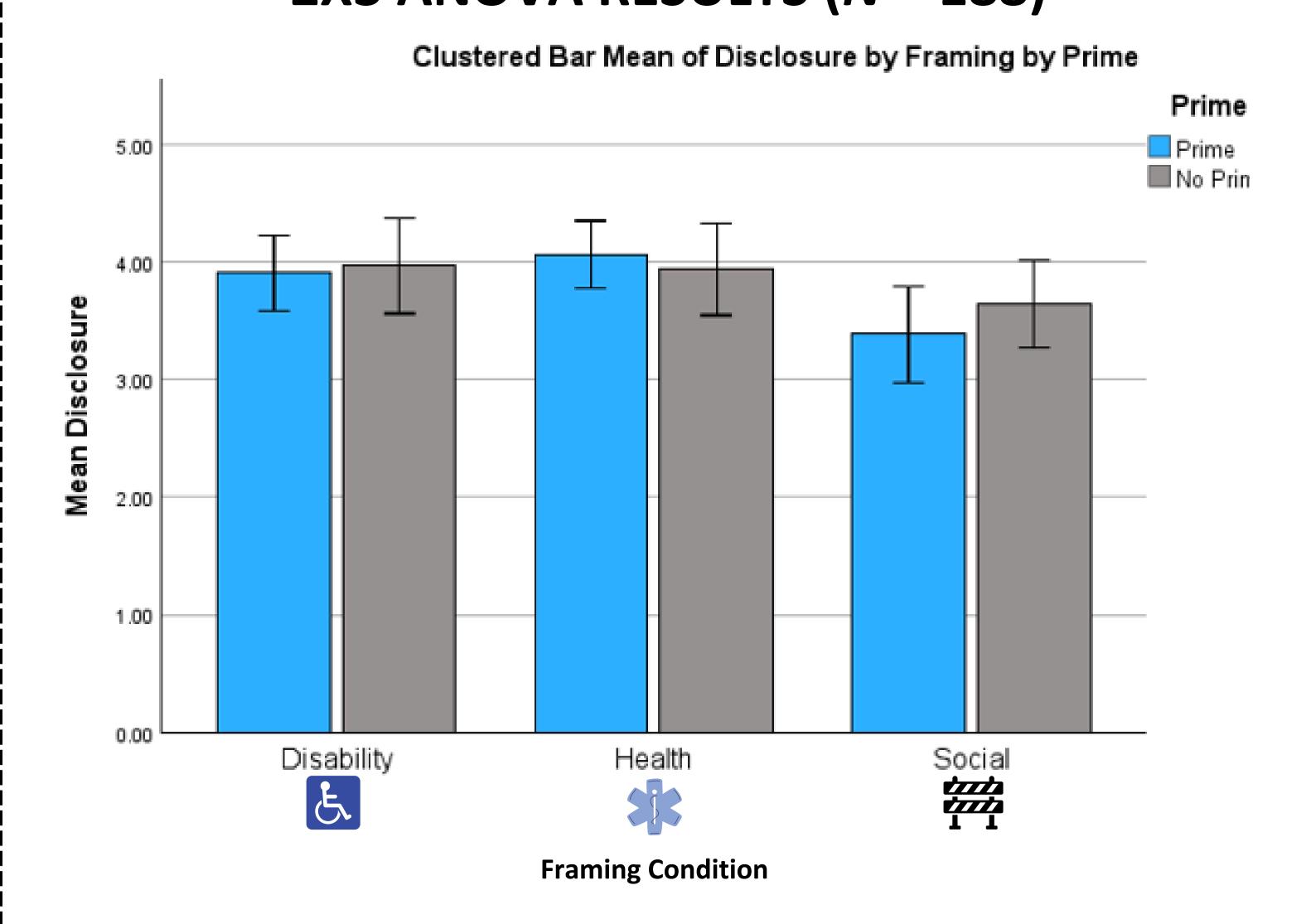




In each framing condition, participants are asked how likely they think a student with a disability is to disclose to their institution.

# RESULTS

### 2X3 ANOVA RESULTS (N = 188)



SIGNIFICANT MAIN EFFECT OF FRAMING ON PERCEIVED DISCLOSURE INTENTION  $F(2, 182) = 4.26, p = .016, n^2 = .045$ 

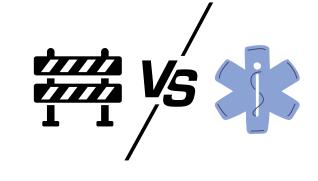
#### RESULTS

NO SIGNIFICANT MAIN EFFECT OF PRIMING ON PERCEIVED DISCLOSURE INTENTION.

$$F(1, 182) = 0.192, p = .662, n^2 = .001$$

NO SIGNIFICANT INTERACTION EFFECT OF PRIMING & FRAMING ON PERCEIVED DISCLOSURE INTENTION.

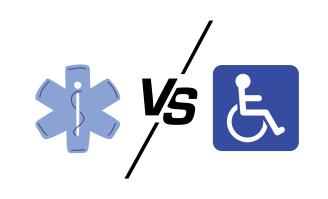
$$F(2, 182) = .057, p = .565, n^2 = .006$$



HIGHER perceived disclosure for the HEALTH framing compared to SOCIAL framing p = .024



HIGHER perceived disclosure for the DISABILITY framing compared to **SOCIAL** framing p = .061



NO DIFFERENCE in perceived disclosure for the HEALTH framing compared to **DISABILITY** framing p = 1

#### DISCUSSION

Results reveal a mismatch in the perceived and observed behaviors of students with disabilities, with the majority of participants believing that students with disabilities are somewhat to extremely likely to seek accommodations (76.6%), while existing research suggests only 35% of students disclose their disability (Newman & Maudus, 2015).